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TO:	FROM:
	 Paul D. Amrozowicz, Reg. No. 45,264
COMPANY: USPTO	DATE: FRIDAY, DECEMBER 17, 2004
FAX NUMBER: 703.872.9306	TOTAL NO. OF PAGES INCLUDING COVER: 43
PHONE NUMBER: 703.308.4357	SENDER'S REFERENCE NUMBER: H0004409-3114
RU:	RECIPIENTS REFERENCE NUMBER: 10/625,295
Information Disclosure Statement	

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NOTES/COMMENTS:

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

	Application Number	10/625,295	
	Filing Date	July 22, 2003	
	First Named Inventor	Gary D'ANGELO	
	Art Unit	3745	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	42	Attorney Docket Number	H0004409-3114

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
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Remarks		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Ingrassia Fisher & Lorenz, PC		
Signature			
Printed name	Paul D. Amrozowicz		
Date	12/17/04	Reg. No.	45,264

**CERTIFICATE OF TRANSMISSION/MAILING**

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Signature			
Typed or printed name	Paul D. Amrozowicz	Date	12/17/04

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